PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees retifications.

maintenance fee notificati	ons.							
CURRENT CORRESPONDE	J.	Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
23914	navo no ovil certificate of maining of transmission.							
LOUIS J. WILI	•	Certificate of Mailing or Transmission						
	I hereby certify that this Fee(s) Transmittal is being deposited with the United							
LOUIS J. WILLE BRISTOL-MYERS SQUIBB COMPANY PATENT DEPARTMENT I hereby certify that this Fee(s) Transmittal is being deposited with the Unstates Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsi transmitted to the USPTO (571) 273-2885, on the date indicated below.								
PATENT DEPAI	RTMENT		į	ransmitted to the USF	TO (\$71) 27	3-2885, on the da	ate indicated below.	
P O BOX 4000 PRINCETON, NJ 08543-4000				Anastasia P; Winslow (Depositor's name)				
				(A~ *	r W	1~1	(Signature)	
				march	1 2	1, 2007	(Date)	
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENT	NAMED INVENTOR .		DOCKET NO.	CONFIRMATION NO.	
10/807,089	03/23/2004		Wenying Li	Li LD0154 DIV1 3840				
TITLE OF INVENTION: MICROBIAL TRANSFORMATION METHOD FOR THE PREPARATION OF AN EPOTHILONE								
TITLE OF INVENTION:	MICROBIAL TRANS	FORMATION METHOL	FOR THE PREPARA	TION OF AN EPOT	HILONE			
r			T					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DI		E FEE TO	TAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400 ART UNIT	\$300	\$0 		\$1700	03/29/2007	
EXAMINER LILLING, HERBERT J		1657	435-117000					
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list CFR 1.363).								
1 111102				the names of up to 3 registered patent attorneys ents OR, alternatively, the name of a single firm (having as a member a 2 Anastasia P. Winslow				
Addings France DOCO/CD/199) stead ad								
Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3								
PTO/SB/47; Rev 03-02 Number is required.	2 registered patent attorneys or agents. If no name is 3							
3. ASSIGNEE NAME AN	D RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or	type)				
			•		ee is identif	ed below, the do	ocument has been filed for	
(A) NAME OF ASSIG		(B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Bristol-Mye	rs Squibb Co	Princeton, New Jersey						
Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🚨 Corporation or other private group entity 🗀 Government								
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Pleas					ny previousl	y paid issue fee s	hown above)	
Issue Fee	A check is enclose	osed.						
Publication Fee (No	lit card. Form PTO-2038 is attached.							
Advance Order - #	The Director is her overpayment, to D	☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-3880 (enclose an extra copy of this form).						
5. Change in Entity State	us (from status indicate	d above)						
a. Applicant claims	SMALL ENTITY state	is. See 37 CFR 1.27.	☐ b. Applicant is no					
NOTE: The Issue Fee and interest as shown by the re	Publication Fee (if req cords of the United Sta	uired) will not be accepte tes Patent and Trademark	d from anyone other tha Office.	in the applicant; a regi	stered attorn	ey or agent; or the	e assignee or other party in	
Authorized Signature	and	Lhi		Date	arch	29,200	37	
Typed or printed name - ANASTASIA P. WINSLOW Registration No. 40,875								
This collection of informa	tion is required by 37 C	FR 1.311. The information	on is required to obtain	or retain a benefit by t	he public wh	ch is to file (and	by the USPTO to process)	
an application. Confidenti submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231	ality is governed by 35 application form to the ms for reducing this burginia 22313-1450. DC 3-1450.	U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the NOT SEND FEES OR	1.14. This collection is depending upon the in e Chief Information Of COMPLETED FORMS	estimated to take 12 a dividual case. Any co ficer, U.S. Patent and TO THIS ADDRESS	minutes to comments on the Trademark Co. SEND TO:	mplete, including he amount of tim office, U.S. Depar Commissioner fo	by the USPTO to process) g gathering, preparing, and ne you require to complete rtment of Commerce, P.O. for Patents, P.O. Box 1450,	
Under the Paperwork Red		persons are required to re	spond to a collection of	information unless it	displays a va	id OMB control 1	number.	